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*Admitted only in Maryland
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*Practice Limited to
Federal Agencies

September 20, 2002

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Commissioner for Patents
Washington, D.C. 20231

Art Unit 1636

Re: U.S. Utility Patent Application
Appl. No. 09/617,116; Filed: July 14, 2000
For: **FOLYLPOLYGLUTAMYL SYNTHETASE GENE TRANSFER TO ENHANCE
ANTIFOLATE DRUG SENSITIVITY**
Inventors: AGHI *et al.*
Our Ref: 0609.4830001/JAG/KRM

Sir:

Transmitted herewith for appropriate action are the following documents:

1. Fee Transmittal Form (PTO/SB/17);
2. Petition for Extension of Time under 37 C.F.R. § 1.136(a)(1);
3. Amendment and Reply Under 37 C.F.R. § 1.111 along with two (2) Abstracts;
4. Our check no. **36718** in the amount of **\$55.00** to cover the extension of time fee; and
5. Return postcard.

It is respectfully requested that the attached postcard be stamped with the date of filing of these documents, and that it be returned to our courier. In the event that extensions of time are necessary to prevent abandonment of this patent application, then such extensions of time are hereby petitioned.

Gp1636

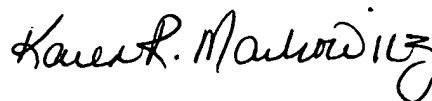
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Commissioner for Patents
September 20, 2002
Page 2

The U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, or credit any overpayment, to our Deposit Account No. 19-0036.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.

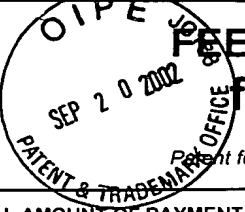


Karen R. Markowicz
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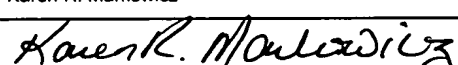
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Enclosures

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 FEE TRANSMITTAL for FY 2002 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/617,116
		Filing Date	July 14, 2000
		First Named Inventor	Manish Aghi
		Examiner Name	Nguyen, Q.
		Group Art Unit	1636
		Attorney Docket No.	0609.4830001/JAG/KRM
TOTAL AMOUNT OF PAYMENT		(\$) 55.00	

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																													
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number: 19-0036 Deposit Account Name: Sterne, Kessler, Goldstein & Fox P.L.L.C. <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		3. ADDITIONAL FEES Large Entity Small Entity Fee Code Fee (\$) Fee Code Fee (\$) Fee Description 105 130 205 65 Surcharge - late filing fee or o 127 50 227 25 Surcharge - late provisional filing fee or cover sheet 139 130 139 130 Non-English specification 147 2,520 147 2,520 For filing a request for ex parte examination 112 920* 112 920* Requesting publication of SIR prior to Examiner action 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action 115 110 215 55 Extension for reply within first month 116 400 216 200 Extension for reply within second month 117 920 217 460 Extension for reply within third month 118 1,440 218 720 Extension for reply within fourth month 128 1,960 228 980 Extension for reply within fifth month 119 320 219 160 Notice of Appeal 120 320 220 160 Filing a brief in support of an appeal 121 280 221 140 Request for oral hearing 138 1,510 138 1,510 Petition to institute a public use proceeding 140 110 240 55 Petition to revive - unavoidable 141 1,280 241 640 Petition to revive - unintentional 142 1,280 242 640 Utility issue fee (or reissue) 143 460 243 230 Design issue fee 144 620 244 310 Plant issue fee 122 130 122 130 Petitions to the Commissioner 123 130 123 130 Petitions related to provisional applications 126 180 126 180 Submission of Information Disclosure Stmt 581 40 481 40 Recording each patent assignment per property (times number of properties) 146 740 246 370 Filing a submission after final rejection (37 CFR 1.129(a)) 149 740 249 370 For each additional invention to be examined (37 CFR 1.129(b)) 179 740 279 370 Request for Continued Examination (RCE) 169 900 169 900 Request for expedited examination of a design application Other fee (specify): Other fee (specify): *Reduced by Basic Filing Fee Paid																																													
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other* <small>*Charge any deficiencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to Deposit Account No. 19-0036.</small>																																															
FEE CALCULATION I. BASIC FILING FEE <table border="1"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td></td></tr><tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5">SUBTOTAL (1) (\$)</td><td></td></tr></tbody></table>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee		106	330	206	165	Design filing fee		107	510	207	255	Plant filing fee		108	740	208	370	Reissue filing fee		114	160	214	80	Provisional filing fee		SUBTOTAL (1) (\$)									
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2. EXTRA CLAIM FEES <table border="1"><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim</td><td></td></tr><tr><td>108</td><td>84</td><td>209</td><td>42</td><td>**Reissue independent claims over original patent</td><td></td></tr><tr><td>110</td><td>18</td><td>210</td><td>9</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5">SUBTOTAL (2) (\$)</td><td></td></tr></tbody></table> <small>** or number previously paid, if greater; For Reissues, see above</small>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	103	18	203	9	Claims in excess of 20		102	84	202	42	Independent claims in excess of 3		104	280	204	140	Multiple dependent claim		108	84	209	42	**Reissue independent claims over original patent		110	18	210	9	**Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)									
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		SUBTOTAL (3) (\$) 55.00																																													

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Karen R. Markowicz	Registration No. (Attorney/Agent)	36,351	Telephone	202-371-2600
Signature		Date	9/20/02		

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